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Florida Department of State Division of Corporations

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LLC AMND/RESTATE/CORRECT OR M/MG RESIGN SWEET WORLD PHOTOGRAPHY, LLC

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COVER LETTER

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SUBJECT:	SWEET WORLD PHOTOGRAPHY, LLC					
30 031 .C1;	Name of Limited Liability Company					
The enclosed	Articles of	Amendment and fee(s) are sub	omitted for filing.			
Please return	all correspo	ndence concerning this matter	to the following:			
		Cheyenne Moseley				
			Name of Person	ng ann annipalanan man malabas ara in problem that and a set of the set of th		
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		100 W. Broadway Suite	100			
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5/26/2015 10:35:09 AM PAGE 1/001 Fax Server



May 26, 2015

FLORIDA DEPARTMENT OF STATE

Division of Corporations

SWEET WORLD PHOTOGRAPHY, LLC 11527 CYPRESS RESERVE DRIVE TAMPA, FL 33626US

SUBJECT: SWEET WORLD PHOTOGRAPHY, LLC

REF: L14000193939

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

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Deborah Bruce Regulatory Specialist II FAX Aud. #: H15000124783 Letter Number: 315A00010960

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15 JUN 10 AN 11: 12
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

P.O BOX 6327 - Tallahassee, Flonda 32314

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

SWEET WORLD PHOTOGRAPHY, LLC

FILED

2015 JUN 10 AM 9: 04

SECNETARY OF STATE! TALLAHASSEE, FLORIDA

(<u>Nameof the Limited Liability C</u> (A Florida Lii	ompany as it now appearated Liability Company)	s on our records.)
The Articles of Organization for this Limited Liability Com- Florida document number <u>L14000193939</u>		/22/2014 and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited	l liability company he	ere:
Jen House Photography, LLC		
The new name must be distinguishable and end with the words "Limite	ed Liability Company," the	designation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADDRES	P(T)	
Enter new mailing address, if applicable:		
(Muiling address MAY BE A POST OFFICE BOX)		
B. If amending the registered agent and/or registered registered agent and/or the new registered office address	<u>s here</u> :	
Name of New Registered Agent:		
New Registered Office Address:	P - 12	ida street a ldress
	ismer i joi	
	City	, Florida Zip Code
New Registered Agent's Signature, if changing Registered A	•	
I hereby accept the appointment as registered agent and provisions of all statues relative to the proper and com	d agree to act in this	

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.

If Changing Registered Agent, Signature of New Registered Agent

If amending the Managers or Authorized Memberon our records, enterthe title, name, and address of each Manager or Authorized Member being added or removed from our records: MGR = Manager AMBR = Authorized Member Title <u>Name</u> Address Type of Action _**_** Add ☐ Remove _____ 🔲 Remove _____ Add ☐ Remove _____ Add _____ Remove ____ Remove

☐ Remove

If amending any other information, enter change(s) here: (Attach additional sh	eets, if necessary.
	,
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Dated May 12 2015.	
and thuse	_
Signature of a number or authorized representative of a me	mber
Jennifer House	
Typed or printed name of signee	

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